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CONFIRMATION NO. 7645

<b>SERIAL NUMBER</b> 10/728,072	<b>FILING OR 371(c) DATE</b> 12/04/2003 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> GUID.626PA
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\* SRS

This appln claims benefit of 60/462,272 04/11/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\* NA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
03/12/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 66	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Stephanie R. Smith</u> <u>SRS</u> Examiner's Signature Initials				

## ADDRESS

51294

## TITLE

Subcutaneous electrode and lead with phoresis based pharmacological agent delivery

<b>FILING FEE RECEIVED</b> 1900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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